

Attorney Docket No. EFIM0205

I hereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner of Patents and Trademarks, Washington, D.C., 20231, on the below date of deposit.

Date of Deposit:	4/15/99	Name of Person Making the Deposit:	Vanessa Knowles	Signature of the Person Making the Deposit:
------------------	---------	------------------------------------	-----------------	---

3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richter et al.

Serial No. 09/267,223

Filed: March 11, 1999

Attorney Docket No. **EFIM0205**

Group Unit: 2722

Examiner: Unknown

Title: ADMINISTRATIVE PRINT SERVER LINK FOR OUTPUT PERIPHERAL DEVICE

April 15, 1999

REQUEST FOR CORRECTED FILING RECEIPT

RECEIVED

APR 29 1999

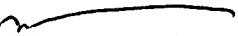
Group 2700

Assistant Commissioner for Patents
Application Processing Division
Customer Correction Branch
Washington, DC 20231

Dear Sir:

Applicant, by his attorney, requests correction of the Official Filing Receipt for the above-referenced patent application. The second inventor's first name is misspelled. Please change the spelling from "BAFI" to -- RAFI--. A copy of the original Filing Receipt is enclosed.

Respectfully submitted,


Michael A. Glenn
Reg. No. 30,176

125 Lake Road
Portola Valley, CA 94028
(650) 851-7138

FILING RECEIPT

APR 19 1999



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/267,223	03/11/99	2722	\$760.00	EFIMO205	20	20	2

MICHAEL A GLENN
125 LAKE ROAD
PORTOLA VALLEY CA 94028

RECEIVED

APR 29 1999

GROUP 2700

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the date presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

BRADLEY S. RICHTER, BELMONT, CA; BAFI HOLTZMAN, BOS;

SANDMATEO, CA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/06/99
TITLE: ADMINISTRATIVE PRINT SERVER LINK FOR OUTPUT PERIPHERAL DEVICE
PRELIMINARY CLASS: 395

RECEIVED

APR 11 1999

MICHAEL GLENN

DATA ENTRY BY: FORD, EVELYN

TEAM: 04 DATE: 04/06/99





UNITED STATES
PATENT AND
TRADEMARK OFFICE

FILE

Commissioner for
Washington, DC
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 674

SERIAL NUMBER 09/267,223	FILING DATE 03/11/1999 RULE	CLASS 358	GROUP ART UNIT 2624	ATTORNEY DOCKET NO. EFIM0205
-----------------------------	-----------------------------------	--------------	------------------------	------------------------------------

APPLICANTS

BRADLEY S. RICHTER, BELMONT, CA;
RAFI HOLTZMAN, SAN MATEO, CA;

** CONTINUING DATA ***** Nowe

** FOREIGN APPLICATIONS ***** Nowe

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/06/1999

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after		
Verified and Acknowledged	Allowance <i>Marcus</i> Examiner's Signature Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENT CLAIMS
CA	20	20	2

ADDRESS

31408

TITLE

ADMINISTRATIVE PRINT SERVER LINK FOR OUTPUT PERIPHERAL DEVICE

FILING FEE RECEIVED 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------	---	---